York Medical Journal, April, 1879) on this subject. From the facts before them the committee felt warranted in drawing the following conclusions:—

1. That defibrinated blood is admirably adapted for use for rectal alimentation.
2. That in doses of two to six ounces it is usually retained without any inconvenience, and is frequently so completely absorbed that very little trace of it can be discovered in the dejections.
3. That administered in this way once or twice a day, it produces in about one-third of the cases for the first few days more or less constipation of the bowels.
4. That in a small proportion of cases the constipation persists, and even becomes more decided the longer the enemata are continued.
5. That in a small percentage of cases irritability of the bowels attends its protracted use.
6. That it is a valuable aid to the stomach whenever the latter is inadequate to a complete nutrition of the system.
7. That its use is indicated in all cases not involving the large intestine, and requiring a tonic influence which cannot readily be obtained by remedies employed in the usual way.
8. That in favourable cases it is capable of giving an impulse to nutrition which is rarely if ever obtained from the employment of other remedies.
9. That its use is wholly unattended by danger.

On the Use of Ether with Cod-liver Oil.

The same committee (*Ibid.*), from an investigation of the evidence before them felt warranted in drawing the following conclusions:—

1. That the addition of ether to cod-liver oil in about the proportion of fifteen minims to each half ounce (or an equivalent amount of the compound spirit of ether) will succeed in the vast majority of cases in enabling the patient to take the oil, even though it previously disagreed.
2. That in some cases in which the oil still disagrees after the addition of the ether, the difficulty may be overcome by giving the ether separately from fifteen minutes to half an hour after the oil is taken.

No facts have been laid before the committee having a bearing upon the question as to whether the etherized oil is superior to the plain oil in its ultimate effect upon nutrition, supposing them to be equally well tolerated by the stomach.

Diuretic Action of Squill.

M. Drouot has studied (*Thèse de Nancy*, 1878) the action of squill on the organism, and particularly on the heart, from a large number of experiments made on animals, and from clinical observations, and has inferred therefrom what the therapeutic consequences of the action will be. In a short historical sketch he shows that there are two principal categories of opinions on the action of squill; one of which maintains that it is a powerful diuretic, and the other, which represents the majority, holds that squill does not exercise any special effect on the kidneys, and only influences the urinary secretion indirectly, by acting upon the heart in a similar way to digitalis. M. Drouot is a warm advocate of the latter opinion, and bases his views on a scientific explanation. The first part of the thesis (*Rev. Méd. de l'Est*, Feb. 15, 1879) contains an account of the author's experiments on dogs and frogs, relating to the action of squill on the heart and circulation. Some of his results confirm the experiments made by Huzemann of Göttingen, while others oppose them. If squill is given in a moderate dose, the pulsations of the heart and the respiration are accelerated, but the former are less ample, and the blood-pressure sinks considerably. This is the initial stage, which has not been described by Huzémann; it is followed by a second stage, during which the pulse and respiration become slower, while the blood-pressure rises to its normal level. If a toxic dose is given, the blood-pressure rises immediately, while the cardiac pulsations become much slower.

The second part of the thesis is devoted to a clinical study of the action of squill. We gather from it that it is a direct diuretic only in cases of dropsy originating from cardiac disease and in cachexia. Is this result due to the action of squill on the heart? It is probable; because in other dropsies, which were owing to alterations of the liver and kidneys, pleurisy or articular rheumatism, the diuretic action of squill has been found to amount to almost next to nothing —*London Med. Record*, May 15, 1879.

Effects of Chloroform, Ethidene, and Ether in Blood Pressure.

Drs. JOSEPH COATS, WILLIAM RAMSAY, and JOHN G. MCKENDRICK, of the Committee on Anæsthetics of the British Medical Association, report (*Journal of Anat. and Phys.*, April, 1879) that the facts obtained from their researches seem to them to warrant the following conclusions:—

1. Both chloroform and ethidene administered to animals have a decided effect in reducing the blood-pressure, while ether has no appreciable effect of this kind.

2. Chloroform reduces the pressure much more rapidly and to a greater extent than ethidene.

3. Chloroform has sometimes an unexpected and apparently capricious effect on the heart's action, the pressure being reduced with great rapidity almost to *nil*, while the pulsations are greatly retarded, or even stopped. The occurrence of these sudden and unlooked-for effects on the heart's action seems to be a source of serious danger to life, all the more that in two instances they occurred more than a minute after chloroform had ceased to be administered, and after the recovery of the blood-pressure.

4. Ethidene reduces the blood-pressure by regular gradations, and not, so far as observed, by these sudden and unexpected depressions.

5. Chloroform may cause death in dogs either by primarily paralyzing the heart or the respiration. The variations in this respect seem to depend to some extent on individual peculiarities of the animals; in some the cardiac centres are more readily effected, in others the respiratory. But peculiarities in the condition of the same animal very probably have some effect in determining the vulnerability of these two centres respectively, and they may both fail simultaneously.

6. In most cases respiration stops before the heart's action; but there was one instance in which respiration continued while the heart had stopped, and only failed a considerable number of seconds after the heart had resumed.

7. The use of artificial respiration was very effective in restoring animals in danger of dying from the influence of chloroform. In one instance its prolonged use produced recovery even when the heart had ceased beating for a considerable time.

8. Under the use of ethidene there was on no single occasion an absolute cessation either of the heart's action or of respiration, although they were sometimes very much reduced. It can therefore be said that, though not free from danger on the side of the heart and respiration, this agent is in a very high degree safer than chloroform.